

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	8/15/00
O.I.P.E. CLASSIFIER		10	8/21/00
FORMALITY REVIEW		71622	9/21/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	
Original	
12	02/12/00
13	02/12/00
14	02/12/00
15	02/12/00
16	02/12/00
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49	02/12/00
50	02/12/00

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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